Dear Chairman Hoeven, Ranking Member Merkley, Chairman Aderholt, and Ranking Member Bishop,

As you work to finalize FY 2019 funding for the Department of Agriculture, we urge you to provide $6.3 billion for the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) to meet caseload, to fill a contingency reserve should caseload projections be incorrect, and to address a number of critical WIC set-asides and initiatives that help this program accomplish its purpose.

As you know, WIC is the premier preventive public health nutrition program supporting low-income mothers and young children (who have or are at risk) for developing nutrition-related diseases and disorders. WIC benefits are not limited only to food; participants also benefit from nutrition education, breastfeeding education and support, and referrals to medical and social services.

Study after study has shown that WIC works. Taxpayers receive a healthy return in costs avoided for every dollar of investment. That is why the Congress must continue to adequately fund this proven program.

**Breastfeeding**
We support the provision of at least the Senate-passed level of $67.5 million for WIC breastfeeding peer counselors. The benefits of breastfeeding are well known and this program has been proven to help increase breastfeeding initiation rates among the WIC population. The program is authorized at $90 million and is long overdue for additional resources to help ensure that more mothers are breastfeeding.
program is authorized at $90 million and is long overdue for additional resources to help ensure that more mothers are breastfeeding.

**Maternal and Infant mortality**
We urge you to provide $5 million for an initiative to address our nation’s troubling maternal and infant mortality rates, including among Native Americans. With an estimated 26.4 deaths for every 100,000 live births in 2015, America has the highest maternal mortality rate among industrialized nations. The infant mortality rate of 5.9 per 1,000 is also unacceptably high. These rates are significantly higher for women and infants of color, and a recent report found the situation is even worse in tribal communities where American Indian and Alaska Native mothers were 4.5 times more likely to die from pregnancy and childbirth related causes than non-Hispanic white mothers.

WIC clinics and staff can leverage referral networks and nutrition education initiatives to raise awareness about mortality risk factors, conduct research, and introduce prevention strategies targeted to low-income women and infants who are at the highest risk for poor outcomes and find out which efforts effectively foster greater awareness about key risk factors associated with maternal and infant mortality.

**Infrastructure**
We urge you to provide at least the Senate passed level of $19 million for WIC infrastructure, funding which supports a variety of items related to building the systems required to run an efficient and effective WIC program.

**WIC Research and evaluation**
We request that you provide $25 million for WIC research and evaluation, including studies, research through schools of public health nutrition, and support for new, innovative pilot projects. Meaningful research allows for evidence-based updates to ensure that funded services and activities reflect the latest nutrition, breastfeeding, and public health science. This research can also help WIC identify areas for improvement and test innovative solutions.

We appreciate your consideration of this request and again urge you to ensure that WIC is fully resourced in FY 2019.

Sincerely,

Gwen Moore  
**MEMBER OF CONGRESS**

Peter Welch  
**MEMBER OF CONGRESS**

Theodore E. Deutch  
**MEMBER OF CONGRESS**

David N. Cicilline  
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Eleanor Holmes Norton
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